



## Risk Assessment

Fiscal Years 2006-07 and 2007-08

**Auditable Areas and Audit Coverage - Health Program**

<b>Auditable Areas</b>	<b>Actual</b>			<b>Planned</b>	
	<b>2003-04</b>	<b>2004-05</b>	<b>2005-06</b>	<b>2006-07</b>	<b>2007-08</b>
<b>Office of Employer and Member Health Services</b>					
Appeals and grievances					
Enroll and maintain complementary annuitant premium program					
Enrollment for active members - retroactive deletions					
Enrollment for retirees and beneficiaries					
Enrollment for retirees and maintenance of State retiree dental					
HIPAA compliance for healthcare					
Management of public agency resolutions					
Medicare					
Public agency member eligibility for health benefits					
Premium billing of contracted agencies					
Update and maintain health plan eligibility					
<b>Office of Health Policy and Program Support</b>					
Data extracts and analysis from HCDSS - data warehouse					
<b>Office of Health Plan Administration</b>					
BlueCard Program - PPO program for out of state					
Contract compliance of long term care					
Contract compliance of third party administrator Blue Cross					
Financial ratio analysis of HMOs					
HMO performance and contract compliance					
Long term care appeals process					
Long term care contract administration and program oversight					
Long term care procure and negotiate contracts					
Pharmacy appeal and escalated medical appeals					
Pharmacy benefit manager contract compliance					



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Rate development (for HMOs and Self Funded)					
Self Funded health plan administration - internal management of program					